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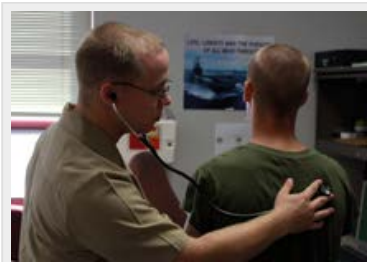
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The Recruit Battalion Aid Station: Ready for Whatever Comes Our Way

Filed under UNCATEGORIZED

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By Hospitalman Marshal F. Reis, 2nd Battalion Aid Station, Marine Corps Recruit Depot, Parris Island, S.C.



Hospital Corpsman Marshall F. Reis, performs an examination during morning sick call at the 2nd Battalion Aid Station, Marine Corp Recruit Depot Parris Island, S.C. (Photo by Regena Kowitz)

I arrive at the 2nd Battalion Aid Station (BAS), Marine Corps Recruit Depot (MCRD)Parris Island, S.C., at 6:15 a.m. every morning, Monday through Friday, to begin my day. Injured and ill recruits from the 2nd Recruit Training Battalion start arriving 15 minutes later for sick call and we're ready to go. I'm joined by a Navy physician assistant (PA), an independent duty corpsman (IDC), two senior corpsmen and six junior corpsmen. Together, we see patients who come with various medical issues ranging from sprained ankles to the common cold and everything in between. Every day presents a different challenge for the BAS due to the vigorous training that each individual recruit experiences while aboard MCRD Parris Island, S.C.

As the day begins, I collect all the sick call chits from either the drill instructors or the recruits. After they're collected, I hand them over to one of my fellow corpsmen to check them in to the Armed Forces Health Longitudinal Technology Application (AHLTA). While this is going on, one or two corpsmen begin taking the vital signs of each recruit who has reported for sick call. During the summer months of training, when we are in hot weather standard operating procedures known as "HOTSOP," patient numbers can range anywhere from 30 to 130 per day.

Once vitals are done, I start triaging patients, sorting those with routine complaints from those with more priority conditions. When triage is finished, I'm assigned to a screening station with a computer, exam bed and all the medical equipment necessary for patient assessment. I start by getting the patient's history, verifying allergy information and any pre-existing medical conditions. I include all of this information in a SOAP (subjective, objective, assessment and plan) note along with a brief overview of the patient's main complaint. The exam is next, and I perform a focused assessment based on the patient's complaint. After that's done, I present my findings to either the PA or the IDC, and he or she gives an appropriate diagnosis, plan for treatment, and a recommended duty status.

The most common priority conditions we see in the BAS include fever, chest pain, and breathing difficulties. These patients receive care first. Once they're taken care of, I move on

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March 2015 (5)

February 2015 (16)

January 2015 (12)

December 2014 (17)

to the routine patients. Most patients can be treated start to finish at the BAS. Each BAS has a small pharmacy, which means the provider can dispense most of the required medications on site. We can also do minor dressing changes and issue crutches. Sometimes though, either because of the patient’s condition or the need for additional tests like labs or x-rays, we need to get the recruit to the Branch Health Clinic (BHC). We also take recruits requiring immediate care due to an injury or fever directly to the Acute Care Area (ACA) at the BHC for further evaluation and treatment.

At the end of day, once the recruits are off deck, I or one of the other corpsmen will make sure that all the recruits who needed follow-up appointments at either the BAS or the BHC were seen. We also make sure that any recruits who were taken to the BHC have received transportation back to the BAS and that their drill instructors know to come pick them up and we inform them of their current duty status. Finally, we check all the medical equipment and ensure supplies are restocked and ready to go for tomorrow.

We never know what injury or illness we’re going to see in recruit sick call, so we need to be ready for whatever comes our way.

← Next post

Previous post →

November 2014 (11)
October 2014 (15)
September 2014 (20)
August 2014 (14)
July 2014 (13)
June 2014 (8)
May 2014 (11)
April 2014 (9)
March 2014 (14)
February 2014 (7)
January 2014 (7)
December 2013 (7)
November 2013 (12)
October 2013 (7)
September 2013 (14)
August 2013 (13)
July 2013 (11)
June 2013 (22)
May 2013 (15)
April 2013 (14)
March 2013 (14)
February 2013 (14)
January 2013 (12)
December 2012 (11)
November 2012 (11)
October 2012 (7)
September 2012 (9)
August 2012 (12)
July 2012 (13)
June 2012 (17)
May 2012 (22)
April 2012 (14)
March 2012 (13)
February 2012 (14)
January 2012 (13)
December 2011 (13)
November 2011 (20)
October 2011 (22)
September 2011 (12)